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U.S. Patent and Tradent Affice; U.S. Debart Affice; U.S. Debart Chief, U.S.

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875   |   |   |                                       |   |                  |   | Application or Docket Number 10/602,688 |                        |    | ing Date<br>25/2003   | To be Mailed           |
|---|---|---|---------------------------------------|---|------------------|---|---|------------------------|----|-----------------------|------------------------|
| APPLICATION AS FILED – PART I (Column 1) (Column 2)   |   |   |                                       |   |                  |   | SMALL ENTITY                            |                        |    |                       | HER THAN               |
| Н   | FOR   |   | NUMBER FILED                          |   | NUMBER EXTRA     |   | RATE (\$)                               | FEE (\$)               | OR | RATE (\$)             | FEE (\$)               |
|   | BASIC FEE   | $\neg$                                    | N/A                                   | LD NO   | N/A              |   | N/A                                     | TEE (a)                | ł  | N/A                   | TEE (8)                |
| ┢   | (37 CFR 1.16(a), (b), s<br>SEARCH FEE                                     | or (c))                                   | N/A                                   |   |                  |   |   |                        | ł  | <del></del>           |                        |
| H   | (37 CFR 1.16(k), (i), (ii)  |   | N/A                                   |   | N/A              |   | N/A                                     |                        | l  | N/A                   |                        |
| TO  | (37 CFR 1.16(o), (p), (   |   | N/A                                   |   | N/A              |   | N/A                                     |                        | ١  | N/A                   |                        |
| (37   | CFR 1.16(i))<br>DEPENDENT CLAIM   | e   | minus 20 =                            |   | •                |   | x \$ =                                  |                        | OR | x s =                 |                        |
| (37   | CFR 1.16(h))  |   | minus 3 = *                           |   |                  |   | x \$ =                                  |                        | ı  | x \$ =                |                        |
|   | APPLICATION SIZE<br>(37 CFR 1.16(s))                                      | FEE shee<br>is \$2<br>addit               | ts of pape<br>50 (\$125<br>ional 50 s | gs exceed 100<br>in size fee due<br>for each<br>in thereof. See<br>CFR 1.16(s). |                  |   |   |                        |    |                       |                        |
|   | MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))                         |   |                                       |   |                  |   |   |                        | 1  |                       |                        |
| * If  | * If the difference in column 1 is less than zero, enter "0" in column 2. |   |                                       |   |                  |   |   |                        | 1  | TOTAL                 |                        |
| APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3) SM   |   |   |                                       |   |                  |   |   | L ENTITY               | OR |                       | ER THAN                |
| AMENDMENT   | 01/07/2008  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR                                     | PRESENT<br>EXTRA |   | RATE (\$)                               | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|   | Total (37 CFR<br>1.18(i))   | * 34                                      | Minus                                 | <b>~</b> 34   | = 0              | 1 | x \$ =                                  |                        | OR | X \$50=               | 0                      |
|   | Independent<br>(37 CFR 1.16(h))   | • 4                                       | Minus                                 | 4   | = 0              | 1 | x \$ =                                  |                        | OR | X \$210=              | 0                      |
|   | Application Size Fee (37 CFR 1.16(s))                                     |   |                                       |   |                  |   |   |                        |    |                       |                        |
| _   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))           |   |                                       |   |                  |   |   |                        | OR |                       |                        |
|   |   |   |                                       |   |                  |   | TOTAL<br>ADD'L<br>FEE                   |                        | OR | TOTAL<br>ADD'L<br>FEE | 0                      |
| (Column 1) (Column 2) (Column 3)  |   |   |                                       |   |                  |   |   |                        |    |                       |                        |
| AMENDMENT   |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                                       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR                                     | PRESENT<br>EXTRA |   | RATE (\$)                               | ADDITIONAL<br>FEE (\$) |    | RATE (\$)             | ADDITIONAL<br>FEE (\$) |
|   | Total (37 CFR<br>1.1601)  |   | Minus                                 |   | =                | 1 | x \$ =                                  |                        | OR | x s =                 |                        |
|   | Independent<br>(37 CFR 1,16(h))   |   | Minus                                 | ***   | =                | ] | x \$ =                                  |                        | OR | x \$ =                |                        |
|   | Application Size Fee (37 CFR 1.16(s))                                     |   |                                       |   |                  | ] |   |                        | ]  |                       |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(j))           |   |                                       |   |                  | 1 |   |                        | OR |                       |                        |
|   |   |   |                                       |   |                  |   |   |                        | OR | TOTAL<br>ADD'L<br>FEE |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  " If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20".  "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1. |   |   |                                       |   |                  |   |   |                        |    |                       |                        |

This collection of information is equated by 37 CER 1.10. The information is required to obtain or retain a benefit by the public which is in Sife (and by the USETO to noceess) an implication. Confidentiality is governed by 85 US of 22 and 37 CER 1.4. This collection is estimated to state 2 remarked to complete in exident gradients on estimated to the size 2 mid-marked to complete in exident gradients, preparing, and submitting the completed application form to the USETO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or segregations form double to sent of the Child formation of Direc. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandrias, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O., Box 1450, Alexandrias, VA 22313-1450, DR NOT SEND FEES OR COMPLETED FORMS TO THIS